	in this information to identify your ca										
Det	otor 1 Sandra N. Irl	by			-						
	otor 2 use, if fiting)				-						
Uni	ted States Bankruptcy Court for the	EASTERN DISTRICT	OF PENNSYLVANIA		_						
	se number <u>22-12234</u>					Check if this is:					
(If kr	own)					An amended filing					
						☐ A suppleme 13 income a		ng postpetition following date:	chapter		
<u>O</u>	fficial Form 106I					MM / DD/ Y	M / DD/ YYYY				
S	chedule I: Your Inco	ome							12/15		
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. (Describe Employment	r spouse is not filing wi	ith you, do not includ	e inform	natio	n about your spo	use. If m	nore space is	needed,		
1.	Fill in your employment information.		Debtor 1	Debtor 2	Debtor 2 or non-filing spouse						
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed			☐ Emplo	☐ Employed				
		Employment status	☐ Not employed		☐ Not employed						
	Include part-time, seasonal, or	Occupation	Inspector								
	self-employed work.	Employer's name	Davlyn Group He	LLC	<u> </u>	<u></u>		 			
	Occupation may include student or homemaker, if it applies.			85 Mennonite Church Road Spring City, PA 19475					····		
		How long employed ti	here? 9/6/2022	! - pres	ent						
Par	t 2: Give Details About Mon	thly income		·							
Esti	mate monthly income as of the dause unless you are separated.		you have nothing to re	port for a	any li	ne, write \$0 in the	space. In	nclude your no	n-filing		
•	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all e	mplo	yers for that perso	n on the I	lines below. If	you need		
					•	For Debtor 1	For Debtor 2 or non-filing spouse				
2.	List monthly gross wages, salar deductions). If not paid monthly, or			2.	\$ _	3,168.75	\$	N/A			
3.	Estimate and list monthly overti		3.	+\$	0.00	+\$	N/A				
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	3,168.75	\$_	N/A			

Official Form 106I Schedule I: Your Income page 1

Debtor 1		Sandra N. Irby			Case number (if known)			22-12234				
	Cor	ny line 4 here	4.		Fo \$	r Debtor 1 3,168.7	' 5		Debtor filing s	2 or pouse N/A		
5.	•	all payroll deductions:			_						-	
5.		• •		_	•	400		•		8114		
	5a.	Tax, Medicare, and Social Security deductions	5a 5l		\$_ s	402.4		\$		N/A	-	
	5b.	Mandatory contributions for retirement plans			\$- \$	0.0		·		N/A	-	
	5c.	Voluntary contributions for retirement plans	50		· -	0.0				N/A	_	
	5d.	Required repayments of retirement fund loans	50		\$_	0.0		÷		N/A	-	
	5e.	Insurance	56	-	\$_ ^	187.8		<u> </u>		N/A	-	
	5f.	Domestic support obligations	51		\$_	0.0		ું —		N/A	_	
	5g.	Union dues	50		\$ _	0.0				N/A	-	
	5h.	Other deductions. Specify:	- ³¹	h.+	\$ _	0.0	<u>. 01</u>	+ \$		N/A	-	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ _	590.2		\$		N/A	-	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	•	\$_	2,578.5	<u> </u>	\$		N/A	-	
8.	8a. 8b.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends	8: 81		\$_ \$_	0.0 0.0		\$ \$		N/A N/A		
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce	80	•	s	0.4		\$		AI/A		
	6.4	settlement, and property settlement.	80		~ _	0.0 0.0		્રૈ—		N/A N/A	_	
	8d. 8e.	Unemployment compensation Social Security	86		- -	0.0		š		N/A N/A	_	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:			*- \$	0.0		s		N/A	-	
	8g.	Pension or retirement income	8 ₉		s ⁻	0.0		š-		N/A		
	8h.	Other monthly income. Specify: Tax refund (add back)		э. h.+	٠.	575.0		+ š		N/A	_	
	••••	Tax (cluid (add back)	_ ``			070.0					- 1	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	.	\$ _	575.0	00	\$		N/A	4	
10	Cal	culate monthly income. Add line 7 + line 9.	10.	6	•	3,153.50 +	6		N/A	= 5	3,153.50	
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	•0.	.		3,193.50	• -		IVA	-	3,133.30	
11.	Star Incl other	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	dep			_			chedule 11.		0.00	
12	Add Writ app	I the amount in the last column of line 10 to the amount in line 11. The res te that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certei</i> lies	ult is <i>n Lia</i>	s th abi	e co lities	mbined month and Related I	ıly ir D <i>ata</i>	come.	12.	s	3,153.50	
13	. Do	you expect an increase or decrease within the year after you file this form No.	?							Combi month	ned ly income	
	_	Vac Evolain					-					

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